

City of Newton



David B. Cohen  
Mayor

## HEALTH AND HUMAN SERVICES DEPARTMENT

J. David Naparstek, Commissioner

1294 Centre Street  
Newton, MA 02459-1544

Telephone 617.796.1420 Fax 617.552.7063

Rev. 5/23/03-Rev. 6/07

### PUBLIC DOCUMENT REQUEST FORM

DATE OF REQUEST: \_\_\_\_\_ (Please indicate only 1 location per form)

☐

RESIDENTIAL

☐

COMMERCIAL

☐

MIXED USE

☐

PUBLIC BLDG/LAND

LOCATION/ADDRESS: \_\_\_\_\_

BUILDING OR ESTABLISHMENT: \_\_\_\_\_

☐

INSPECTION REPORTS

☐

COMPLAINT INSPECTIONS

☐

FOOD ILLNESS INVESTIGATIONS

☐

LEAD PAINT  
(Residential Only)

☐

ASBESTOS  
(Residential Only)

☐

ANIMAL PERMITS  
(Residential Only-Check List)

☐

WELL PERMITS  
(Irrigation/Monitoring-List)

☐

LICENSE/PERMIT ISSUED  
(Computer Lists)

☐

CERTIFICATE OF HABITABILITY  
(Residential Only)

☐

21 E

☐

TITLE 5 (SEPTIC SYSTEMS)

☐

OTHER\*

\*OTHER (Be specific):

\_\_\_\_\_  
\_\_\_\_\_

Print-Name of person requesting information

Name of Company or Firm

Address

Home Phone

Work Phone

Cell Phone/Pager

Fax

Signature

#### OFFICE USE ONLY

ACTION TAKEN:

☐

VERBAL INFORMATION

☐

TELEPHONE RESPONSE

☐

COPIES PROVIDED

DATE PROCESSED: \_\_\_\_\_ HEALTH AGENT: \_\_\_\_\_ FEE:

\$

Email: [dnaparstek@newtonma.gov](mailto:dnaparstek@newtonma.gov)